



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 7084

|                             |                                       |              |                        |                                   |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|
| SERIAL NUMBER<br>09/671,393 | FILING DATE<br>09/27/2000<br><br>RULE | CLASS<br>358 | GROUP ART UNIT<br>2625 | ATTORNEY DOCKET NO.<br>XER-2-0318 |
|-----------------------------|---------------------------------------|--------------|------------------------|-----------------------------------|

## APPLICANTS

Gaurav Sharma, Webster, NY;

Keith T. Knox, Rochester, NY;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/200,984 11/30/1998 PAT 6,288,798 *js*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None*

F REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/27/2000

|   |                           |                        |                       |                            |
|---|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>NY | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>23 | INDEPENDENT<br>CLAIMS<br>3 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance |                           |                        |                       |                            |
| Verified and Acknowledged<br>Examiner's Signature <i>[Signature]</i> Initials <i>js</i>   |                           |                        |                       |                            |

## ADDRESS

Albert P Sharpe III Esq  
Fay Sharpe Fagan Minnich & McGee LLP  
1100 Superior Avenue  
7th Floor  
Cleveland, OH  
44114-2518

## TITLE

Show-through compensation apparatus and method

|                                    |   |   |
|------------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>1094 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|------------------------------------|---|---|